TRAVEL EXPENSE CLAIM

See Instructions and Privacy

The state of the s						nt on Reverse Side Issan or employee number				DEPARTME	Page	1	of	1
Linda Ulrich											mor's WDC Office			
POSITION CB/ID NUMBER						DIVISION OR BUREAU					INDEX NUMBER			
Director														
						HEADQUARTERS ADDRESS					TELEPHONE NUMBER			
CITY STATE ZIP						444 N. Capitol Street, NW Suite 134					ZIP			
52							Washington					20001		
MEALS										DC			20001	
MONTH/YEAR		LOCATION							CARFARE		7		BUSINESS	TOTAL
Apr-09		WHERE EXPENSES	LODGING				INCIDENTALS	COST OF		TOLLS,	PRIVATE	CAR USE	EXPENSE	EXPENSES
DATE	TIME	WERE INCURRED		BREAKFAST	LUNCH	DINNER		TRANS.	TYPE USED	PARKING	MILES	AMOUNT		FOR DAY
01-Apr		Washington, DC						Z _{20.00}				0.00		20.00
03-Apr		Washington, DC						/ 8.00				0.00		8.00
07-Apr		Washington, DC						5.25				0.00		5.25
23-Apr		Washington, DC						/ 14.00				0.00		14.00
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SUBTOTALS 0.00 COLUMN CODE (ACCTG. USE ONLY)			0,00	0.00	0.00	0.00	0.00	47.25	0.00	0.00	0	0.00	0.00	ENECT OF
COLUMN	CODE (ACCIG. USE ONLY		217422		San Chical		超 50.000			. History			616 745 FE
-		TOTAL									r		\$47	.25
PURPOSE OF TRIP, REMARKS AND DETAILS (Attach receipts when required) Travel to and from meetings for the month of April											NORMAL WORK HOURS			
											PRIVATE VEHICLE LICENSE NUMBER			
											MILEAGE I	RATE CLAII	MED	
										5	0.445			
											AGENO	Y ACCOL	MARKET PER	FFICE
		at the above is a true state										USEC		
		owned vehicle was used a								qual to or	PAID BY	REVOLVING F	JND CHECK N	UMBER
		med, and that I have met	ine requireme	ms as prescri	Dea by SAM	Sections 075	00,0751,0752	2, 0753 and 0	1754		0	400	ラケ	5
CI AIMANIT'S					DATE		SI						DATE	
					5-4	-09							1/13/) Pj
				7								1	DATE /	./
													9/18	/09